

Amendment No. 1 to SB0177

Crowe
Signature of Sponsor

AMEND Senate Bill No. 177*

House Bill No. 567

by deleting all language after the enacting clause and substituting:

SECTION 1. Tennessee Code Annotated, Title 71, Chapter 5, Part 1, is amended by adding the following as a new section:

(a) As used in this section:

(1) "Bureau" means the bureau of TennCare;

(2) "Director" means the director of TennCare;

(3) "Healthcare provider" means a healthcare professional who is licensed, registered, certified, or permitted pursuant to title 63 and regulated under the authority of either the department of health or an agency, board, council, or committee attached to the department of health; and

(4) "Remote maternal health services":

(A) Means the use of digital technology:

(i) To collect medical and other forms of health data from a patient and electronically transmitting that information securely to a healthcare provider in a different location for interpretation and recommendation; and

(ii) Through a device that is compliant with the federal Health Insurance Portability and Accountability Act of 1996 (42 U.S.C. § 1320d et seq.) and approved by the federal food and drug administration; and

(B) Includes a device that:

(i) Performs remote fetal monitoring, including maternal heart rate, fetal heart rate, amniotic fluid, placenta location, fetal presentation, tone, and movement;

(ii) Measures physiological data, including blood pressure, pulse, pulse oximetry, weight, blood glucose levels, or other physiologic data determined to be medically necessary;

(iii) Uses remote non-stress test technology;

(iv) Uses remote ultrasound technology; or

(v) Uses Doppler effect technology.

(b) The bureau shall develop and implement a pilot program during fiscal years 2023-2024, 2024-2025, and 2025-2026 to provide:

(1) Remote maternal health services to a TennCare recipient who meets the eligibility criteria of subsection (c);

(2) Medically necessary remote maternal health services to a TennCare recipient eligible under subsection (c) for up to twelve (12) months postpartum; and

(3) Payment to healthcare providers who provide remote maternal health services that includes the cost of the remote patient monitoring devices being used.

(c) A TennCare recipient is eligible to receive remote maternal health services pursuant to the pilot program established by this section, if:

(1) The recipient is pregnant;

(2) The recipient's healthcare provider makes a referral to the recipient's managed care organization for a determination that:

(A) The recipient's maternal health needs are capable of being met through maternal health services; and

(B) The recipient meets the remote maternal health pilot program criteria;

(3) The recipient's managed care organization determines:

(A) The recipient has an increased likelihood of experiencing a higher-risk pregnancy. Clinical conditions or factors that may be considered include the presence of:

(i) Existing health conditions that are reasonably known to be associated with high-risk pregnancies and that are capable of being monitored remotely;

(ii) Age factors, including teenage pregnancy or pregnancy after thirty-five (35) years of age;

(iii) Lifestyle factors, such as alcohol, tobacco, or drug use; or

(iv) Conditions of pregnancy, including multiple gestation, gestational diabetes, preeclampsia, eclampsia, previous preterm births, or birth defects or genetic conditions in the fetus; or

(B) The recipient lives in a county without a licensed obstetrician/gynecologist who participates in TennCare; and

(4) The recipient's managed care organization determines the remote maternal health services meet the criteria of § 71-5-144.

(d) The director is authorized to seek a federal waiver that the director determines is necessary to implement the pilot program described in this section.

(e) The pilot program created by this section terminates June 30, 2026.

SECTION 2. This act takes effect July 1, 2023, the public welfare requiring it.